



*Application No. 09/506,819*  
*Docket No. 1982-0149P*

## APPLICATION DATA SHEET

### APPLICATION INFORMATION

Application Type:: **Regular**  
Subject Matter:: **Utility**  
CD-ROM or CD-R?: **None**  
Number of CD disks:: **0**  
Number of copies of CDs:: **0**  
Sequence submission?: **None**  
Computer Readable Form (CRF)?:  
Number of copies of CRF:  
Title:  
Attorney Docket Number:  
Request for Early Publication?: **No**  
Request for Non-Publication?: **No**  
Suggested Drawing Figure:  
Total Drawing Sheets:  
Small Entity?: **No**  
Petition Included?: **No**  
Petition Type:

### APPLICANT INFORMATION

Applicant Authority Type:: **Inventor**  
Primary Citizenship:  
Country:  
Status:: **Full Capacity**  
Given Name:: **HIROSHI**  
Middle Name:  
Family Name:: **OGAWA**  
City of Residence:

State or Province of Residence::

Country of Residence::

Street of mailing address::

City of mailing address::

State or Province of mailing address::

Country of mailing address::

Postal or Zip Code of mailing address::

Applicant Authority Type:: Inventor

Primary Citizenship::

Country::

Status:: Full Capacity

Given Name::

Middle Name::

Family Name::

City of Residence::

State or Province of Residence::

Country of Residence::

Street of mailing address::

City of mailing address::

State or Province of mailing address::

Country of mailing address::

Postal or Zip Code of mailing address::

Applicant Authority Type:: Inventor

Primary Citizenship::

Country::

Status:: Full Capacity

Given Name::

Middle Name::

Family Name::

City of Residence::

State or Province of Residence::

Country of Residence::

Street of mailing address::

City of mailing address::

State or Province of mailing address::

Country of mailing address::

Postal or Zip Code of mailing address::

#### **CORRESPONDENCE INFORMATION**

Correspondence Customer Number:: 02292

#### **REPRESENTATIVE INFORMATION**

Representative Customer Number::	02292
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#### **DOMESTIC PRIORITY INFORMATION**

Application::	Continuity Type::	Parent Application::	Parent Filing Date::
This application			

**FOREIGN PRIORITY INFORMATION**

Country::	Application Number::	Filing Date::	Priority Claimed::

**ASSIGNEE INFORMATION**

Assignee Name::

Street of mailing address::

City of mailing address::

State or Province of mailing address::

Country of mailing address::

Postal or Zip Code of mailing address::